ARIZONA

DEPARTMENT OF CORRECTIONS 1601 W. JEFFERSON, MAIL CODE 55302 PROCUREMENT SERVICES PHOENIX, ARIZONA 85007

SOLICITATION NO. ADOC12-00001105

AMENDMENT NO. 5

Contract Officer: Karen D. Ingram

SOLICITATION DUE DATE: December 21, 2011

SIGNED COPY OF THIS AMENDMENT MUST BE RETURNED WITH YOUR BID SOLICITATION.
THIS SOLICITATION IS AMENDED AS FOLLOWS:

RFP NO. ADOC12-00001105 - Privatization for All Correctional Health Services

CHANGES IN REQUIREMENTS THAT WILL FORMALLY CHANGE THE REQUIREMENTS WILL BE SHOWN AT THE BEGINNING OF THIS AMENDMENT.

AMEND TO CHANGE

FROM:

2.1.1.3: Responses to Sections and Subsections shall be provided in the consecutive order of the Sections and Subsections, beginning with Subsection 2.1.1.

TO:

2.1.1.3: Responses shall be in the consecutive order of the Sections and Subsections of the RFP.

AMEND TO CHANGE

FROM:

- 2.10.23 Emergency Aid for Department Employees, Visitors, and Contractors: Emergency aid for Department employees, visitors, and Contractors injured while on the grounds of an Arizona State Prison Complex shall be provided as appropriate in accordance with professional ethics and practice standards and as allowed pursuant to Arizona Revised Statute Section 32-1471. The 9-1-1 emergency telephone calling system shall be used as necessary.
 - 2.10.16.4 The Offeror shall describe their plan and capabilities to meet this requirement.

TO:

- 2.10.23 Emergency Aid for Department Employees, Visitors, and Contractors: Emergency aid for Department employees, visitors, and Contractors injured while on the grounds of an Arizona State Prison Complex shall be provided as appropriate in accordance with professional ethics and practice standards and as allowed pursuant to Arizona Revised Statute Section 32-1471. The 9-1-1 emergency telephone calling system shall be used as necessary.
 - 2.10.23.1 The Offeror shall describe their plan and capabilities to meet this requirement.

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AMEND TO CHANGE:

FROM:

2.10.25.9 The Contractor shall be responsible for all costs related to storage of medical records, including those currently residing in a hard-copy format and those that shall eventually reside in the EHR. The Contractor shall work with the Department Contract Monitor in establishing procedures to ensure that the Department can retrieve and store medical records in compliance with existing Arizona State Public Records laws and rules. As part of the response to this Request for Proposal, the Contractor shall submit a written plan for medical record conversion from the current hard-copy format into the Contractor's EHR solution. At a minimum this plan should contain the timeframes, milestones and staffing necessary to complete the medical record conversion process.

TO:

2.10.25.9 The Contractor shall work with the Department Contract Monitor in establishing procedures to ensure that the Department can retrieve and store medical records in compliance with existing Arizona State Public Records laws and rules. As part of the response to this Request for Proposal, the Contractor shall submit a written plan for medical record conversion from the current hard-copy format into the Contractor's EHR solution. At a minimum this plan should contain the timeframes, milestones and staffing necessary to complete the medical record conversion process.

Questions submitted on November 18, 2011

Question 1: RFP Page - 116 - 2.22.4 Information Technology - The RFP states that all software used by the Department shall be capable of integration with existing software or data in use by the Department including the AMIS system. Please designate the additional Department systems and data that must integrate 2.1 with the Contractor's systems.

Answer: ADC expects the Contractor's EHR to be self-sustaining and will not require it to interface with to any ADC systems other than AIMS, with the exception of file data transfers to AIMS. For any other systems ADC uses Microsoft products.

Question 2: RFP Page 117 - 2.22.5.1.1 Plan for Paper Record Conversion - Is it the Department's intent to convert all paper records to electronic format and load into the EMR? If so, please specify if this includes both inactive and active records and the associated volume of in terms of record counts and average pages per chart. This information will be used to determine computer storage needs, scanning equipment, and personnel required to load the information into the medical record.

Answer: The Contractor will be required to convert paper records to electronic format for all inmates

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currently incarcerated in ADC state-run prisons, all inmates who are transferred from other facilities to ADC state-run prisons, and all new inmates incarcerated in ADC state-run prisons. When an inmate returns to custody and his medical record is retrieved from storage, the chart will then be required to be converted to EHR electronic format. On November 30, 2011, ADC had 33,641 inmates in ADC state-run prisons. Although the size of inmate medical records varies widely, medical records typically may range from 200 to 1,200 pages. Medical records are maintained in volumes of 200 to 400 pages and some inmates have multiple volumes. Medical record pages are not always uniform size and may be stapled.

Ouestion 3: RFP Page 117 - 2.22.5.2 - Interface with AIMS - Is the Department willing to use the industry standard HL7 format for integration with the AIMS system

Answer: At this time simple text based comma delimited/non-delimited FTP is used. However, ADC would be open to review the scope of the export using HL7 or similar standard to transfer data. If the solution is technically viable and the work can be completed in a reasonable time it will be considered. Oueuing software may also be considered to ensure end-to-end delivery.

Question 4: RFP Page 117 - 2.22.5.3 - Interfacing with external pharmacy, labs, and other clinical systems. -Please specify the external vendors, applications, and software versions the Department intends to interface with the EMR.

Answer: ADC expects the contractor's proposed Electronic Health Record (EHR) to be able to interface with external vendors the Contractor uses for a most efficient system. Therefore, the Contractor should describe how their proposed EHR would interface with outside vendors in the pharmacy operations.

Question 5: RFP Page 118 - 2.22.6.2 - CIPS maintenance charges - Please specify the maintenance costs that the Vendor my need to pay under this section

Answer: The CIPS maintenance charge for FY 2011 was \$25,000.

Question 6: RFP Page 118 - 2.22.6 - The proposed Electronic Pharmacy System - Is the Department currently using CIPS for Computerized Medication Order Entry? If not, how are medication orders placed currently (manual, another electronic order system, etc...)?

Answer: Yes. ADC is currently using CIPS for Computerized Medication Order Entry.

Question 7: RFP Page 119 - 2.22.7.3 - Data Conversion - Will the Department supply the human resources required to complete the data extractions from the source AIMS system and resolve issues requiring AIMS application and data knowledge?

Answer: ADC will provide the necessary resources needed to import and export the data from AIMS to the proposed system with a similar commitment from the vendor to design and implement the solution. ADC reserves the right to override vendor requests for specialized interfaces.

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Question 8: RFP Page 2 - 1.3 Pre Proposal Conference - Please provide a copy of the Pre-Proposal Conference sign in sheet.

Answer: This information is provided in *Pre-Proposal Conference Attendance Report*, which has been posted under Data and Reports at

http://www.azcorrections.gov/adc/divisions/adminservices/data report list 092111.aspx

Question 9: RFP Page 9 - 1.26 Evaluation - Please clarify how 1.26.1.3 Special Terms and Conditions and 1.26.1.4 Uniform Instructions to Offerors and Uniform Terms and Conditions will be evaluated as they are not included in the required Proposal response that is to begin with Subsection 2.1.1 as described in Subsection 2.1.1.3.

Answer: See change at the beginning of this Amendment to section 2.1.1.3.

Question 10: RFP Page 73 - 2.10.23 Emergency Aid - The Subsection of this requirement is numbered 2.10.16.4. Is the Department requesting a description of the Vendor's plan and capabilities to meet the requirements of Subsection 2.10.23?

Answer: RFP, Section 2.10.23, contained a misnumbered subsection. Please see change to Section 2.10.23 at the beginning of this amendment.

Questions submitted on November 22, 2011and November 23, 2011

Ouestion 1: Regarding Section 2.3.2, Experience, is it an unconditional requirement that, as stated is subsection 2.3.2.1, "Offerors shall have at least five (5) years of business/corporate experience with in the last ten (10) years providing at least one of the following: [2.3.2.1.1 Medical Services as defined in this Request for Proposal to a total daily population of at least 10,000 clients in a correctional or custodial setting. OR 2.3.2.1.2. Mental health services as defined in this Request for Proposal to a daily population of at least 10,000 clients in a correctional or custodial setting.]" For example, would Offerors still be considered qualified if they do not have at least five(5) years of this business/corporate experience but still meet all other criteria related to experience?

Answer: The Offeror must meet the experience requirement stated in RFP Section 2.3.2.1., 2.3.2.1.1 or 2.3.2.1.2 An Offeror would not be qualified if they do not at least five (5) years of business/corporate experience with in the last ten (10) years providing the required service.

Question 2: What is the preference point?

Answer: Preference is achieved by meeting the minimum requirements and exceeding that requirement where preference is identified.

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Question 3: Who were the attendees at the pre-bid meeting?

Answer: This information is provided in Pre-Proposal Conference Attendance Report, which has been posted under Data and Reports at

http://www.azcorrections.gov/adc/divisions/adminservices/data report list 092111.aspx

Question 4: As stated in Subsection 2.1.1.3, "Responses to Sections and Subsections shall be provided in the consecutive order of the Sections and Subsections, beginning with Subsection 2.1.1." To clarify this requirement, do items such as 2.1, 2.2, 2.3, etc. constitute Sections, whereas items such as 2.1.1, 2.1.2, 2.1.3, etc. constitute Subsections? If so, do we also need to acknowledge that we have read, understand, and shall comply with each item falling under each Subsection (e.g., items containing at least four(4) digits such as 2.1.1.1, 2.1.1.2, 2.1.1.3, etc., including those in simple list format such as with items 2.1.3.1.1 through 2.13.1.18), or does acknowledgement of the subsection only (i.e., those with three(3) digits) suffice to cover all items listed within the respective Subsection, excluding any items requiring the submission of information?

Answer: Given that the term "Section" and/or "Subsection" may be used differently by different people, the Offeror should acknowledge that they have read, understand, and shall comply with each RFP Section/Subsection by stating the **number** assigned to the Section/Subsection. For example, the Offer may state:

- "I have read, understand, and shall comply with 2.1.3 in its entirety." or
- "I have read, understand, and shall comply with 2.1.3 and 2.1.3.1 through 2.1.3.4." or
- "I have read, understand, and shall comply with 2.1.3 through 2.1.3.4.2."

Question 5: Proposal Timeframe - Would the Department consider granting a 30-day extension of the due date of proposals in order to allow sufficient time for vendors to evaluate the large volume of data associated with this procurement as well as review the answers to questions and other materials necessary to develop responsible proposals? Currently, there are five other state correctional systems (MD, FL, NM, PA, NC) with active RFPs underway for inmate health services, which is an unprecedented volume of procurement activity in our industry. By granting an extension of the due date, Arizona assures itself that vendors will have sufficient time to fully evaluate the requirements of the RFP and develop the most cost-efficient solution for the Arizona Department of Corrections.

Answer: The Proposal due date shall remain December 21, 2011.

Question 6: Telemedicine - In section 2.8.9.1, the RFP states that the contractor may elect to use the Department's existing telemedicine equipment. However, it does not specify what equipment is in place. Please provide detailed information about what telemedicine equipment is currently in place in AZ facilities.

Answer: Current telemedicine equipment available by ADC site/complex:

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- 1. ASPC-Douglas: Telemed location is in 800 medical building on Mohave Yard. Equipment: Tandberg, Otoscope, Patient Exam Camera, Digital Camera and computer.
- 2. ASPC-Eyman: Telemed location is Browning Unit. Equipment: Tandberg, Patient Camera Exam, Digital Camera and Computer.
- 3. ASPC-Florence: Telemed location is in Central Unit. Equipment: Tandberg, Otoscope, Patient Camera Exam, Digital Camera and Computer.
- 4. ASPC-Lewis: Telemed location is in Complex Medical. Equipment: Tandberg, Patient Camera Exam, Digital Camera and Computer.
- 5. ASPC-Perryville: Telemed location is in Complex Medical. Equipment: Tandberg, Otoscope, Camera, Computer.
- 6. ASPC-Safford: Telemed location is in the Medical Building on the Tonto Yard. Equipment: Tandberg, Otoscope, Patient Exam Camera, Digital Camera and Computer.
- 7. ASPC-Tucson: Telemed location is HUB Building 7. Equipment: Tandberg, Otoscope, Patient Exam Camera, Digital Camera and Computer.
- 8. ASPC-Winslow: Telemed location is in Medical Building. Equipment: Tandberg, Otoscope, Patient Camera Exam, Digital Camera and Computer.
- 9. ASPC-Yuma: Telemed location is in Medical, Dakota Building 9. Equipment: Tandberg, Otoscope, Patient Exam Camera, Digital Camera and Computer.

Question 7: Health Services Contracts - In the listing of documents on the Arizona DOC website for this procurement there is a document entitled ADC Health Services Contracts under Data & Reports. That document is dated May 3, 2011. In speaking with providers we have learned new contracts have been signed since May 3, 2011. Is it possible to get an updated listing that includes all health services contracts signed since May 3, 2011?

Answer: The document posted is current and the Department has not established any new contracts since that time.

Question 8: Computers - Will the department make any computers currently in use by medical staff available to the contractor? If yes please provide the number of computers by site and the approximate age of each.

Answer: Per RFP Section 2.22.1, the Contractor shall provide all computer hardware.

Information regarding current ADC computer equipment used at each facility is provided in ADC Health Services Equipment Inventory - Owned and Leased as of June 2011, which has been posted under Data and Reports at

http://www.azcorrections.gov/adc/divisions/adminservices/data report list 092111.aspx

Question 9: IT Infrastructure - Please describe the connectivity that exists in all health care areas of each institution. Are all points of medical service delivery currently served by at least Cat 5 cabling?

Answer: Under RFP Section 2.22.2, a Contractor can either utilize a sectioned off portion of the existing Page 6 of 9

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ADC layer-2 switcher fabric or provide their own. With handoff at the Wide Area Network interface at the layer-3 router. From a Wide Area Network perspective the Vendor is responsible for that part of the connectivity. The ADC Local Area Network (LAN) consists mostly of 100 BASE-T. Three areas of 10 BASE-5 exist: ASPC-Eyman Cook Unit, SMU-1 and Browning Unit.

Question 10: EMR - Is the department going to require that all current paper medical records be scanned into the new EMR or will a plan that incorporates current medications and other current relevant information such as problem lists and most recent medical status suffice?

ANSWER: ADC will require that all current paper medical records be scanned into the new EHR. The Contractor will be required to convert paper records to electronic format for all inmates currently incarcerated in ADC state-run prisons, all inmates who are transferred from other facilities to ADC state-run prisons, and all new inmates incarcerated in ADC state-run prisons. When an inmate returns to custody and his medical record is retrieved from storage, the chart will then be required to be converted to EHR electronic format. On November 30, 2011, ADC had 33,641 inmates in ADC state-run prisons. Although the size of inmate medical records varies widely, medical records typically may range from 200 to 1,200 pages. Medical records are maintained in volumes of 200 to 400 pages and some inmates have multiple volumes. Medical record pages are not always uniform size and may be stapled.

Question 11: Medical Records - 2.10.25.9 Storage of medical records. Does the department expect paper medical records to be stored at the inmate's location throughout the current incarceration? Does the department expect that achieved medical records will be stored at a DOC location or at an offsite facility rented by the vendor? Does the department expect that only medical records of current inmates will be the responsibility of the vendor or does the department expect the vendor to assume the responsibility of medical records that have already been achieved by the DOC?

Answer: Please see change to Section 2.10.25.9 at the beginning of this Amendment. ADC has removed the requirement that the Contractor shall be responsible for all costs related to the storage of all existing medical records and for the retrieval of medical records. The Contractor shall be responsible for the management of the records and shall work with the Department Contract Monitor in establishing procedures to ensure that the Department can retrieve and store medical records in compliance with existing Arizona State Public Records laws and rules.

Question 12: EMR - 2.2.22 in order to appropriately determine the appropriate EMR delivery configuration please provide a list of all points of medical service delivery in each institution. Please include all treatment areas doctor/clinician offices and any other place an inmate medical encounter may occur including but not limited to medication distribution locations?

Answer: The reference to RFP Section 2.2.22 is not clear. Regarding the request for information, be advised that ADC provided all potential Offerors the opportunity to attend on-site inspections of all 10 Arizona State Prison Complexes between November 3 and November 18. Please see RFP Section 1.2.

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Question 13: EMR - 2.22.1.1 In order to assist with pricing an EMR can the department estimate the number of user licenses it expects to request for department use?

Answer: ADC estimates that it may require up to twenty (20) user licenses during the Contract term.

Question 14: Medical Records - 2.10.25.9 Has the department taken into account the current costs of achieving medical records and such storage in its total operating costs? If so what are the associated costs including personnel to retrieve achieved records?

Answer: Please see change to Section 2.10.25.9 at the beginning of this Amendment. ADC has removed the requirement that the Contractor shall be responsible for all costs related to the storage of all existing medical records and for the retrieval of medical records.

Question 15: RFP Page 18 - IRS W-9 Form Request - The W-9 form was not included with the RFP. Does the Department want the vendors to submit a completed W-9 form as part of the proposal?

Answer: The W-9 form has been added as part of this amendment.

Question 16: RFP Page 19 - 2.1.1.5 - This section requires that information be provided to a particular Section or Subsection under the response to that Section or Subsection with the exception of the full size drawings required under Subsection 2.6.15. However, certain Sections/Subsections of the RFP are asking for additional documentation i.e. 2.3.9.1 job descriptions and resumes, 2.4.1 financial statements, 2.4.4 reports and 2.8.7 letters of intent. Given the volume of this information, would it be acceptable to the Department to indicate that the required documentation is provided as an attachment, rather than put it in the narrative of the technical response?

Answer: Required documentation may be provided as an attachment in the response to a particular Section or Subsection, if it follows the Section or Subsection. For example, the information required under 2.3.5 may be included as an attachment, but that attachment must follow Subsection 2.3.5 and must precede the response to Subsection 2.3.6. It can not be included as an attachment that is contained in a separate binder or that is part of a group of attachments, exhibits, appendices at the end of a proposal.

Question 17: RFP Page 1 - 1.2.5 - Please provide a list of the On-Site Inspection Tour attendees.

Answer: This information is provided in On-Site Inspection Attendance Reports, which has been posted under <u>Data and Reports</u> at

http://www.azcorrections.gov/adc/divisions/adminservices/data report list 092111.aspx

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ALL OTHER PROVISIONS OF THE SOLICITATION SHALL REMAIN IN THEIR ENTIRETY

Vendor hereby ack understanding of a	nowledges receipt and bove amendment.	The above referenced Solicitation Amendment is hereby executed this 9th day of December, 2011 at Phoenix, Arizona.						
Signature	Date							
Typed Name and Title		Lan	Ciara da					
Name of Company		Denel Pickering	Chief Procurement Officer					



State of Arizona Substitute W-9 & Vendor Authorization Form

Purpose: Establish or update a vendor account with the State of Arizona. This form meets the Federal requirements to request a taxpayer identification number (TIN), request certain certifications and claims for exemption, as well as the State of Arizona requirements for vendor establishment.

Instructions: Complete form if

1. You are a U.S. person (including a resident alien);

2. You are a vendor that provides goods or services to an Arizona state agency; AND

3. You will receive payment from the State of Arizona.

Return completed form to the state agency with whom you do business, for review and authorization.

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